

<div>ORDER FOR SUPPLIES OR SERVICES</div> <div>(Contractor must submit four copies of invoice.)</div>										<div>Form Approved</div> <div>OMB No. 0704-0187</div> <div>Expires Jun 30, 1997</div>		<div>PAGE 1 OF</div> <div>4</div>		
<div>Public reporting burden for this collection of information is estimated to average 1 hour per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to Department of Defense, Washington Headquarters Services, Directorate for Information Operations and Reports, 1215 Jefferson Davis Highway, Suite 1204, Arlington, VA 22202-4302, and to the Office of Management and Budget, Paperwork Reduction Project (0704-0187), Washington, DC 20503.</div>														
<div>PLEASE DO NOT RETURN YOUR FORM TO EITHER OF THESE ADDRESSES.</div> <div>SEND YOUR COMPLETED FORM TO THE PROCUREMENT OFFICIAL IDENTIFIED IN ITEM 6.</div>														
1. CONTRACT/PURCH ORDER NO. N00383-02-G-014G				2. DELIVERY ORDER NO. UBE6				3. DATE OF ORDER (YYMMDD) 2004 FEB 06		4. REQUISITION/PURCH REQUEST NO. YPC03300000022			5. PRIORITY DOA1	
6. ISSUED BY Defense Supply Center Columbus 3990 E.Broad St. P.O. Box 16704 Columbus,OH 43216-5010 Local Administrator: PAABCAC (614)692-7512 / FAX: (614)692-5269 E-mail: Dorinda.Conner@dla.mil				CODE SP0700		7. ADMINISTERED BY (If other than 6) DCMA GENERAL DYNAMICS DEFENSE SYST 128 LAKESIDE AVE BURLINGTON VT 05401-4985 CRITICALITY: B				CODE S4601A		8. DELIVERY FOB <input type="checkbox"/> DEST <input checked="" type="checkbox"/> OTHER (See Schedule if other)		
9. CONTRACTOR GENERAL DYNAMICS ARMAMENT AND TECHNICAL PRODUCTS INC. 128 LAKESIDE AVENUE BURLINGTON VT 05401-4985				CODE 05606		FACILITY CODE		10. DELIVER TO FOB POINT BY(Date) (YYMMDD) 268 DAYS ARO		11. MARK IF BUSINESS IS <input type="checkbox"/> SMALL <input type="checkbox"/> SMALL DISADVANTAGED <input type="checkbox"/> WOMEN-OWNED				
NAME AND ADDRESS								12. DISCOUNT TERMS NET 30 days		13. MAIL INVOICES TO See Block 15				
14. SHIP TO See Schedule - Do Not Ship to Address in Block 6 FMS Requirement CLINS: 0001				CODE		15. PAYMENT WILL BE MADE BY HQ0337 HQ0337 DFAS COLUMBUS CENTER NORTH ENTITLEMENT OPERATIONS P O BOX 182266 COLUMBUS OH 43218-2266 EFT: T				CODE HQ0337		MARK ALL PACKAGES AND PAPERS WITH CONTRACT OR ORDER NUMBER		
16. TYPE OF ORDER		DELIVERY <input checked="" type="checkbox"/>		This delivery order is issued on another Government agency or in accordance with and subject to terms and conditions of above numbered contract.										
		PURCHASE		Reference your offer dated 2003 NOV 06, 5BC5M3 and furnish the following on terms specified herein.										
ACCEPTANCE. THE CONTRACTOR HEREBY ACCEPTS THE OFFER REPRESENTED BY THE NUMBERED PURCHASE ORDER AS IT MAY PREVIOUSLY HAVE BEEN OR IS NOW MODIFIED, SUBJECT TO ALL OF THE TERMS AND CONDITIONS SET FORTH, AND AGREES TO PERFORM THE SAME.														
NAME OF CONTRACTOR SIGNATURE TYPED NAME AND TITLE DATE SIGNED (YYMMDD)														
<input type="checkbox"/> If this box is marked, supplier must sign Acceptance and return the following number of copies:														
17. ACCOUNTING AND APPROPRIATION DATA/LOCAL USE														
CG: 97X4930 5CC0 001 26.0 S33150 97X4930 5CC0 001 22.1 S33150 (TRANS)														
18. ITEM NO.		19. SCHEDULE OF SUPPLIES/SERVICE						20. QUANTITY ORDERED/ACCEPTED*		21. UNIT	22. UNIT PRICE		23. AMOUNT	
		Remarks: CONFIRMING ORDER -- DO NOT DUPLICATE ACCELERATED DELIVERY IS ACCEPTABLE AND DESIRED AT NO COST TO THE GOVERNMENT.						TOTAL: 1						
* If quantity accepted by the Government is same as quantity ordered, indicate by X. If different, enter actual quantity accepted below quantity ordered and encircle.						24. UNITED STATES OF AMERICA R. Schneider Jr PAAAAA5						25. TOTAL \$ 1174.00		
						BY: Robert Schneider						29. DIFFERENCE		
26. QUANTITY IN COLUMN 20 HAS BEEN <input type="checkbox"/> INSPECTED <input type="checkbox"/> RECEIVED <input type="checkbox"/> ACCEPTED, AND CONFORMS TO THE CONTRACT EXCEPT AS NOTED						TRACTING/ORDERING OFFICER HER NO.						30. INITIALS		
DATE SIGNATURE OF AUTHORIZED GOVERNMENT REPRESENTATIVE						32. PAID BY						33. AMOUNT VERIFIED CORRECT FOR		
36. I certify this account is correct and proper for payment.						31. PAYMENT <input type="checkbox"/> COMPLETE <input type="checkbox"/> PARTIAL <input type="checkbox"/> FINAL						34. CHECK NUMBER		
DATE SIGNATURE AND TITLE OF CERTIFYING OFFICER												35. BILL OF LADING NO.		
37. RECEIVED AT		38. RECEIVED BY (Print)				39. DATE RECEIVED (YYMMDD)		40. TOTAL CONTAINERS		41. S/R ACCOUNT NUMBER		42. S/R VOUCHER NO.		

CONTINUATION SHEET	Order Number: N00383-02-G-014G-UBE6	PAGE 2	OF PAGES 4
<p>FOB: ORIGIN SACO, ME.</p> <p>CERTIFICATE OF CONFORMANCE IS ACCEPTABLE.</p> <p>INSPECTION/ACCEPTANCE @ ORIGIN</p> <p>INSPECTION POINT FOR BOTH SUPPLIES AND PACKAGING:</p> <p>GENERAL DYNAMICS ARMAMENT AND TECHNICAL PRODUCTS (05606)</p> <p>SECONDARY ADMIN LOCATION:</p> <p>SAME AS PRIMARY ADMIN LOCATION</p>			

CONTINUATION SHEET

Order Number:

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SECTION B

PR YPC03300000022
NSN 3040-01-472-1662

ITEM DESCRIPTION:

SHAFT, SHOULDERED
GENERAL DYNAMICS ARMAMENT AND (05606) P/N 10053533

<u>ITEM</u>	<u>PR</u>	<u>PRLI</u>	<u>QUANTITY</u>	<u>UNIT</u>	<u>UNIT PRICE</u>	<u>AMOUNT</u>
0001	YPC03300000022	0001	1	EA	\$1174.00000	\$1174.00

QTY VARIANCE: PLUS 0% MINUS 0%
INSPECTION POINT: ORIGIN
ACCEPTANCE POINT: ORIGIN

PREP FOR DELIVERY

PKGING DATA - MIL-STD-2073-1D, 15 DEC 1999
QUP = 001: PRES MTHD = 10: CLNG/DRY = 1: PRESV MAT = 00:
WRAP MAT = CA: CUSH/DUNN MAT = XX: CUSH/DUNN THKNESS = X:
UNIT CONT = D4: OPI = O:
INTRMDTE CONT = E5: INTRMDTE CONT QTY = AAA:
PACK CODE = Q: PACKING LEVEL = B:
MARKING SHALL BE IN ACCORDANCE WITH MIL-STD-129.
SPECIAL MARKING CODE: 00 - NO SPECIAL MARKING.
PALLETIZATION SHALL BE IN ACCORDANCE WITH DC1636P001 REV E
DATED 3029

DOD BAR CODE MARKING REQUIRED IN ACCORDANCE WITH
MIL-STD-129 (LATEST REVISION) MARKING AND BAR
CODING IN ACCORDANCE WITH AIM BC1.

DELIVER FOB: ORIGIN BY: 2004 OCT 31

PARCEL POST ADDRESS:

FMS REQ'T
CONTACT TRANS OFFICE AT ADMIN OFF PRIOR TO SHIPMENT

CONTINUED ON NEXT PAGE

SECTION B

M/F: (TCN) DSRA5V32950030 XXX
RDD A03 CONTACT TRANS OFFICE AT ADMIN OFFICE PRIOR TO SHIPMENT
PROJ S15 TP 3
SUP ADD DA4QBD SIG L

FOR GOVERNMENT USE ONLY: IPD 12

DIC A31 DIST N01 ADV FC NL

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REMIT PAYMENT TO:

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